Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Kevin	
		r government-issued ure identification (for	First name	First name
	exa	mple, your driver's	R.	
	licer	nse or passport).	Middle name	Middle name
		g your picture	Busch	
		tification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	Onl	y the last 4 digits of r Social Security		
	nun Indi	nber or federal vidual Taxpayer ntification number	xxx-xx-4940	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINS	EINs
5.	Where you live	5409 Vandalia Ave. Cleveland, OH 44144	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Kevin R. Busch			Case n	umber (if known)
Par	Tell the Court About	Your Bankruptcy Ca	ise		
7.	The chapter of the Bankruptcy Code you are		orief description of each, see I go to the top of page 1 and c		C. § 342(b) for Individuals Filing for Bankruptcy
	choosing to file under	Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		☐ Chapter 13			
8.	How you will pay the fee	about how yo order. If your a pre-printed	ou may pay. Typically, if you a attorney is submitting your pa address.	re paying the fee yourself, your behalf, your	ne clerk's office in your local court for more details you may pay with cash, cashier's check, or money attorney may pay with a credit card or check with
			y the fee in installments. If yo ee <i>in Installment</i> s (Official Forn		and attach the Application for Individuals to Pay
		☐ I request that	nt my fee be waived (You ma uired to, waive your fee, and r	y request this option only if may do so only if your incor	you are filing for Chapter 7. By law, a judge may, ne is less than 150% of the official poverty line that ments). If you choose this option, you must fill out
					n 103B) and file it with your petition.
9.	Have you filed for	■ No.			
	bankruptcy within the last 8 years?	☐ Yes.			
	·	District		When	Case number
		District		When	Case number
		District		When	Case number
10.	Are any bankruptcy	■ No			
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor			Relationship to you
		District	-	_ When	Case number, if known
		Debtor			Relationship to you
		District		When	Case number, if known
11.		■ No. Go to I	ine 12.		
	residence?	☐ Yes. Has yo	our landlord obtained an eviction	on judgment against you?	
			No. Go to line 12.		
			Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	t About an Eviction Judgme	nt Against You (Form 101A) and file it as part of

Deb	tor 1 Kevin R. Busch			Case number (if known)
arı	3: Report About Any Bu	sinesses	You Own as a Sole Prop	prietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of	business
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.		Check the appropriate	e box to describe your business:
			☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset F	Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (a	as defined in 11 U.S.C. § 101(53A))
			☐ Commodity Bi	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the all	pove
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	es. If you indicate that you ans, cash-flow statement, a S.C. 1116(1)(B).	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under C	hapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	eter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chap	ster 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	4: Report if You Own or	Have An	v Hazardous Property or	Any Property That Needs Immediate Attention
	Do you own or have any		y mazaraouo r roporty or	7. II opolity That I toodo III III oo
٠.	property that poses or is	■ No.		
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to			
	public health or safety? Or do you own any			
	property that needs immediate attention?		If immediate attention is needed, why is it needed	1?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Kevin R. Busch

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	otor 1 Kevin R. Busch			Case number	er (if known)
ar	t 6: Answer These Questi	ons for Re	porting Purposes		
16.	What kind of debts do you have?			consumer debts? Consumer debts are def rsonal, family, or household purpose."	ined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
				business debts? Business debts are debts vestment or through the operation of the bus	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ss debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses		are paid that funds will be a	. Do you estimate that after any exempt propavailable to distribute to unsecured creditors	perty is excluded and administrative expenses ?
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
ar	t7: Sign Below				
or	you	I have exa	umined this petition, and I de	eclare under penalty of perjury that the infor	mation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	
				d not pay or agree to pay someone who is not the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request r	elief in accordance with the	e chapter of title 11, United States Code, spe	ecified in this petition.
		bankruptc and 3571.	y case can result in fines up	nt, concealing property, or obtaining money on to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Kevin R.		Signature of Debto	or 2
		Executed	on March 11, 2019 MM / DD / YYYY	Executed on MN	M / DD / YYYY

Debtor 1 Kevin R. Busch	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anna Marie Wall	Date	March 11, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Anna Marie Wall 0095884		
Printed name		
Rauser & Associates		
Firm name		
614 W. Superior # 950		
Cleveland, OH 44113		
Number, Street, City, State & ZIP Code		
Contact phone 216-263-6200	Email address	www.ohiolegalclinic.com
0095884 OH		
Bar number & State		

		tion to identify your	case:			
Debt	or 1	Kevin R. Busch First Name	Middle Name	Last Name		
Debt						
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bank	ruptcy Court for the:	NORTHERN DISTRIC	CT OF OHIO		
	number					
(if kno	wn)				_	heck if this is an mended filing
					u	nonded ming
Off	icial Ear	m 106Sum				
			and I iahilities a	and Certain Statistical Information		12/15
				le are filing together, both are equally responsible	or supr	
inforr	nation. Fill ou	it all of your schedule	es first; then complete	the information on this form. If you are filing amen- ck the box at the top of this page.		
			new Summary and the	ck the box at the top of this page.		
Part	1: Summar	ize Your Assets				
						ur assets lue of what you own
					Val	de of what you own
		B: Property (Official Fo 55, Total real estate, f			\$	88,200.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/E	3	\$	13,700.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	101,900.00
Dest	O. C	ina Varra I iabilisiaa	•			- ,
Part	Z. Summar	ize Your Liabilities				
						ur liabilities ount you owe
			laims Secured by Proper nn A, Amount of claim, a	rty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	63,543.00
		•	Unsecured Claims (Offic	, ,	•	
				ims) from line 6e of Schedule E/F	\$	550.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	16,612.22
				Your total liabilities	\$ \$	80,705.22
Part	3: Summar	ize Your Income and	Expenses			
		our Income (Official Fo		ile I	\$	1,475.00
		our Expenses (Official on the contract of the			\$	2,115.00
Part			Administrative and Sta			
6.		• •	on this part of the form.	?? Check this box and submit this form to the court with y	our othe	r schedules.
	Yes					
7.	What kind of	debt do you have?				
			dabta 0			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

888.46

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clain	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	550.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	550.00

ebtor 1	Kevin R. Busch						
CDIOI I	First Name	Middle Nar	me	Last Name		-	
ebtor 2 pouse, if filing)	First Name	Middle Nar	me	Last Name		_	
nited States E	Sankruptcy Court for the:	NORTHERN D	DISTRICT OF OH	IIO		_	
ase number				_			☐ Check if this is a amended filing
	orm 106A/B Ile A/B: Prop	perty					12/15
rt 1: Describ	oe Each Residence, Buildin	g, Land, or Other	Real Estate You O	wn or Have an Interest In			
□ No. Go to P	or have any legal or equitaborant 2. e is the property?	- le interest in any r	residence, building	g, land, or similar property	?		
□ No. Go to P ■ Yes. Where	Part 2.	·		g, land, or similar property ty? Check all that apply	?		
No. Go to P Yes. Where 1 5409 Val	Part 2.		What is the proper ■ Single-family Duplex or mo	t y? Check all that apply	Do no the ar	mount of any secure	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
No. Go to P ■ Yes. Where 1 5409 Val	Part 2. e is the property? ndalia Ave. ss, if available, or other description		What is the proper Single-family Duplex or mo	ty? Check all that apply home ulti-unit building m or cooperative d or mobile home	Do no the ar <i>Credi</i>	mount of any secure	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
No. Go to P Yes. Where 5409 Var Street addres Clevelar	Part 2. e is the property? ndalia Ave. ss, if available, or other description	144-0000 ZIP Code	What is the proper Single-family Duplex or more condominium Manufacture Land Investment properties of the condominium Other Who has an interest	ty? Check all that apply / home ulti-unit building m or cooperative d or mobile home property	Do not the ar Credii Curre entire Desci (such e a life	ent value of the property? \$88,200.00 ribe the nature of y	Current value of the portion you own? \$88,200.0
No. Go to P Yes. Where 5409 Val Street addres	Part 2. e is the property? ndalia Ave. ss, if available, or other description nd OH 44 State	144-0000 ZIP Code	What is the proper Single-family Duplex or more condominium Manufacture Land Investment properties of the condominium Timeshare Other Who has an interest	rty? Check all that apply / home ulti-unit building m or cooperative d or mobile home property st in the property? Check or	Do not the ar Credii Curre entire Desci (such e a life	ent value of the property? \$88,200.00 ribe the nature of yn as fee simple, ter estate), if known.	current value of the portion you own? \$88,200.0
No. Go to P Yes. Where 5409 Val Street addres Clevelar City	Part 2. e is the property? ndalia Ave. ss, if available, or other description nd OH 44 State	144-0000 ZIP Code	What is the proper Single-family Duplex or mo Condominium Manufacture Land Investment p Timeshare Other Who has an interes Debtor 1 only Debtor 2 only At least one	rty? Check all that apply / home ulti-unit building m or cooperative d or mobile home property st in the property? Check or	Do not the ar Credii Curre entire Desci (such a life Fee	ent value of the exproperty? \$88,200.00 ribe the nature of yn as fee simple, ter estate), if known. Simple Check if this is consee instructions)	Current value of the portion you own? \$88,200.0 your ownership interest hancy by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto	r1 <u>K</u>	evin R. Bus	ch		Case number (if known)	-
3. Car	s, vans,	trucks, tracto	ors, sport utility ve	hicles, motorcycles		
□N	ام					
_						
■ Y	es					
0.4		Cadillac		What have the state of the stat	Do not deduct sec	cured claims or exemptions. Put
3.1	Make:			Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Escalade		■ Debtor 1 only	Creditors Wno Ha	ve Claims Secured by Property.
	Year:	2002 nate mileage:	200,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		ormation:	200,000	☐ At least one of the debtors and another	onthis property.	portion you out
	Location	on: 5409 Va	ndalia Ave.,			
		and OH 4414		☐ Check if this is community property	\$1,600	0.00 \$1,600.00
L				(see instructions)		
Exal N Y S Ad pag	mples: B lo es d the do ges you	oats, trailers, i	motors, personal wa	d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including that number here	cle accessories g any entries for	\$1,600.00
				terest in any of the following items?		Current value of the
Бо уо	u own c	i nave any le	gai or equitable illi	lerest in any of the following items?		portion you own? Do not deduct secured claims or exemptions.
	No	Major appliand		, china, kitchenware		•
			Appliances, Hou	usehold Goods & Furnishings		\$5,000.00
Exa	No		ohones, cameras, m	eo, stereo, and digital equipment; computers, pr nedia players, games phone, tablet, and Playstation 4	rinters, scanners; music c	collections; electronic devices \$1,000.00
Exa I	amples: i		igurines; paintings, ns, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	r art objects; stamp, coin	, or baseball card collections;
Exa	amples: S	for sports an Sports, photog musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
Ц ,	ies. De	SUIDE				
	•	Pistols, rifles	, shotguns, ammunit	tion, and related equipment		

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Official Form 106A/B

page 2

Schedule A/B: Property

De	ebtor 1	Kevin R. Busch		Case number	(if known)
	☐ Yes.	Describe			
11.	Clothe	s			
	Examp		s, furs, leather coats, designer	wear, shoes, accessories	
	□ No ■ Ves	Describe			
	— 165.	Describe			
		W	earing Apparel & Beddin	g	\$200.00
12.	Jewelr Examp		y, costume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watches	, gems, gold, silver
	□ No				
	■ Yes.	Describe			
		Ea	arrings and one (1) ring		\$600.00
13.		rm animals	, horoco		
	□ No	oles: Dogs, cats, birds	s, norses		
	■ Yes.	Describe			
		0	ne (1) Dog		\$0.00
		U	nie (1) bog		40.00
14.	☐ No	her personal and ho		llready list, including any health aids you did n	ot list
		Au		het and socket sets, air compressor,	\$1,000.00
			0.		
15			II of your entries from Part 3	, including any entries for pages you have atta	shed \$7,800.00
	101 F	art 3. Write that hum	Dei Heie		
Pa	ert 4: Des	scribe Your Financial <i>i</i>	Assets		
			or equitable interest in any	of the following?	Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
16.	Cash				
	Examp	oles: Money you have	e in your wallet, in your home, i	n a safe deposit box, and on hand when you file y	our petition
				Ocal co	hd
				Cash on	hand \$300.00
17	Donosi	its of money			
1/.		oles: Checking, saving		certificates of deposit; shares in credit unions, bro	okerage houses, and other similar
	□ No	institutions. If yo	ou have multiple accounts with	the same institution, list each.	
	_			Institution name:	
			Checking Account		
		1	7.1. (overdrafted)	Huntington National Bank	\$0.00

Official Form 106A/B Schedule A/B: Property page 3

De	btor 1	Kevin R. Busch	Case number (if known)	
18.		mutual funds, or publicly traded stocks les: Bond funds, investment accounts with brok	kerage firms, money market accounts	
	■ No			
	☐ Yes	Institution or issuer na	ame:	
19.	Non-pu joint ve	•	rated and unincorporated businesses, including an interest in a	an LLC, partnership, and
	No			
	☐ Yes.	Give specific information about them		
		Name of entity:	% of ownership:	
20.	Negotia	ment and corporate bonds and other negoti able instruments include personal checks, cash egotiable instruments are those you cannot tran	niers' checks, promissory notes, and money orders.	
	■ No			
	☐ Yes. (Give specific information about them		
		Issuer name:		
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing plans	S
	■ No			
	🗖 Yes. I	List each account separately.		
		Type of account:	Institution name:	
22.	Your sl		that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies,	or others
	■ No			
	☐ Yes		Institution name or individual:	
23	Δnnuiti	ies (A contract for a periodic payment of money	v to you, either for life or for a number of years)	
	■ No	(A contract for a periodic payment of money	y to you, entrier for the or for a fluribler of years)	
	■ No □ Yes	Issuer name and description.		
	□ 165			
	26 U.S.0	s in an education IRA, in an account in a qual C. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition progran	n.
	■ No	Institution name and description	. Separately file the records of any interests.11 U.S.C. § 521(c):	
	☐ Yes	institution hame and description.	. Separately life the records of any interests. 11 0.3.C. § 521(c).	
	Trusts, ■ No	equitable or future interests in property (oth	her than anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and les: Internet domain names, websites, proceed		
	■ No			
	☐ Yes.	Give specific information about them		
27.		es, franchises, and other general intangibles	s erative association holdings, liquor licenses, professional licenses	
	■ No	3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3		
		Give specific information about them		
Мс	ney or i	property owed to you?		Current value of the
	. '			portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

28. Tax refunds owed to you		Case number (if known)	
☐ No ■ Yes. Give specific information ab	pout them, including whether you already filed the	returns and the tax years	
	2018 Tax Refund. Debtor will most owe.	likely Federal & State	Unknown
29. Family support Examples: Past due or lump sum No Yes. Give specific information	alimony, spousal support, child support, maintenar	nce, divorce settlement, property se	ettlement
benefits; unpaid loans No	rou ty insurance payments, disability benefits, sick pay you made to someone else	v, vacation pay, workers' compensa	ation, Social Security
 ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life No 	e insurance; health savings account (HSA); credit,	homeowner's, or renter's insurance	•
☐ Yes. Name the insurance compa Com		Beneficiary:	Surrender or refund value:
	ether or not you have filed a lawsuit or made a t disputes, insurance claims, or rights to sue	demand for payment	
	Back wages from previous employments Absolute Surfaces, LLC. He is owed from December 2018-January 2019. Formendo, 38777 Taylor Pkwy, Nortl Phone No. 440-935-2314.	two months worth of pay le worked for Angelo	\$4,000.00
34. Other contingent and unliquidate ■ No □ Yes. Describe each claim	ed claims of every nature, including countercla	iims of the debtor and rights to s	et off claims
35. Any financial assets you did not■ No□ Yes. Give specific information	already list		
	our entries from Part 4, including any entries fo		\$4,300.00
Part 5: Describe Any Business-Related	Property You Own or Have an Interest In. List any rea	al estate in Part 1.	
37. Do you own or have any legal or equi ■ No. Go to Part 6. □ Yes. Go to line 38.	table interest in any business-related property?		
Official Form 106A/B	Schedule A/B: Property		page s

19-11369-jps Doc 1 FILED 03/13/19 ENTERED 03/13/19 15:45:56 Page 14 of 57

Best Case Bankruptcy

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Deb	tor 1 Kevin R. Busch		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You lif you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. I	Oo you own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
•	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No 1 Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write the			\$0.00
Part		nat namber nere		φ0.00
55.	Part 1: Total real estate, line 2			\$88,200.00
56.	Part 2: Total vehicles, line 5	\$1,600.00		· · ·
57.	Part 3: Total personal and household items, line 15	\$7,800.00		
58.	Part 4: Total financial assets, line 36	\$4,300.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,700.00	Copy personal property total	\$13,700.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$101.900.00

Official Form 106A/B Schedule A/B: Property page 6

ation to identify your	case:			
Kevin R. Busch				
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
				☐ Check if this is an amended filing
	Kevin R. Busch First Name	First Name Middle Name First Name Middle Name	Kevin R. Busch First Name Middle Name Last Name First Name Last Name	Kevin R. Busch First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption	
5409 Vandalia Ave. Cleveland, OH 44144 Cuyahoga County	\$88,200.00	•	\$136,925.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Debtor's Residence Purchased in 2014 for \$70,500 PPN: 012-18-014 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(.1)(.1)	
2002 Cadillac Escalade 200,000 miles Location: 5409 Vandalia Ave	\$1,600.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Cleveland OH 44144 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(2)	
Appliances, Household Goods & Furnishings	\$5,000.00		\$5,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020:00(**)(**)(0)	
Three t.v.'s, cellphone, tablet, and Playstation 4	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2020:00(:3)(:7)(2)	
Wearing Apparel & Bedding Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Elio Holli Golloddio 77D. TTT			100% of fair market value, up to any applicable statutory limit	2020.00(,)(-)(d)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

r1 Kevin R. Busch			Case number (if known)	
rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
arrings and one (1) ring	\$600.00		\$600.00	Ohio Rev. Code Ann. §
ine from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(b)
uto mechanic tools - ratchet and ocket sets, air compressor, etc.	\$1,000.00	•	\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(5)
ine from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
ash on hand	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
10 10 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11 05 11			100% of fair market value, up to any applicable statutory limit	2020.00(1)(0)
ederal & State: 2018 Tax Refund. ebtor will most likely owe.	Unknown		Unknown	Ohio Rev. Code Ann. § 2329.66(A)(18)
ne from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	
ederal & State: 2018 Tax Refund. ebtor will most likely owe.	Unknown	-	Unknown	Ohio Rev. Code Ann. § 2329.66(A)(3)
ne from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	,
ederal & State: 2018 Tax Refund. ebtor will most likely owe.	Unknown		Unknown	Ohio Rev. Code Ann. § 2329.66(A)(9)(f)
ne from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	
ack wages from previous mployment. Debtor worked at	\$4,000.00	•	Unknown	Ohio Rev. Code Ann. § 2329.66(A)(18)
bsolute Surfaces, LLC. He is owed wo months worth of pay from eccember 2018-January 2019. He vorked for Angelo Dormendo, 38777 aylor Pkwy, North Ridgeville, OH 4039. Phone No. 440-935-2314. ine from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
ack wages from previous mployment. Debtor worked at	\$4,000.00			Ohio Rev. Code Ann. § 2329.66(A)(13)
absolute Surfaces, LLC. He is owed wo months worth of pay from becember 2018-January 2019. He worked for Angelo Dormendo, 38777 aylor Pkwy, North Ridgeville, OH 4039. Phone No. 440-935-2314. ine from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	,

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

E:II :	n this inform	ation to identify you	ur 0000			
		ation to identify you	ir case:			
Debt	or 1	Kevin R. Busch	Middle Name Last Name			
Debt	or 2	Filst Name	Middle Name Last Name			
	se if, filing)	First Name	Middle Name Last Name		-	
Unite	ed States Banl	kruptcy Court for the:	NORTHERN DISTRICT OF OHIO			
					-	
(if know	e number				☐ Check	if this is an
					_	led filing
~	–	4000				
	cial Form					
<u>Scl</u>	nedule [D: Creditors	Who Have Claims Secure	ed by Propert	<u>y </u>	12/15
is nee	ded, copy the		If two married people are filing together, both are out, number the entries, and attach it to this form.			
	er (if known).					
_		nave claims secured by	, , , ,	Vari harra mathina alaa t		
_	_		his form to the court with your other schedules.	You have nothing else t	to report on this form.	
	Yes. Fill in a	all of the information	below.			
Part	1: List All	Secured Claims		Column A	Column B	Column C
			more than one secured claim, list the creditor separates a particular claim, list the other creditors in Part 2. As	ely	Value of collateral	Unsecured
	as possible, list	t the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Home Poin Corp.	it Financial	Describe the property that secures the claim:	\$62,143.00	\$88,200.00	\$0.00
	Creditor's Name		5409 Vandalia Ave. Cleveland, OH	1		
			44144 Cuyahoga County			
			Debtor's Residence			
	NIMI O #770	O Forthe Doord	Purchased in 2014 for \$70,500 PPN: 012-18-014			
	NMLS #770 Suite 200	6 Entin Road	As of the date you file, the claim is: Check all that	I		
		y, NJ 07054	apply. ☐ Contingent			
	Number, Street, C	City, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	owes the deb	t? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only		An agreement you made (such as mortgage or	secured		
	ebtor 2 only		car loan)			
	ebtor 1 and Deb	otor 2 only e debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	heck if this clai		Other (including a right to offset) Mortgage	9		
	ommunity deb		— Other (including a right to offset)	-		
Date	debt was incur	rred <u>2014</u>	Last 4 digits of account number	1		
2.2	National Ca	ash Advance	Describe the property that secures the claim:	\$1,400.00	\$1,600.00	\$0.00
	Creditor's Name		2002 Cadillac Escalade 200,000	1	<u> </u>	
			miles			
			Location: 5409 Vandalia Ave.,			
			Cleveland OH 44144 As of the date you file, the claim is: Check all that			
	5194 Pearl Cleveland,		apply.			
		City, State & Zip Code	☐ Contingent			
	Number, Street, C	Sity, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	owes the deb	t? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only ebtor 2 only		An agreement you made (such as mortgage or sar loan)	secured		
	ebtor 2 only ebtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		e debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Debtor 1	Kevin R. Busc	ch			Case number (if known)	
	First Name	Middle Name	Last Name	_		
	if this claim relates	s to a Ot	her (including a right to offset)	Title Loan	1	
Date debt	was incurred 20	18	Last 4 digits of account num	ber <u>4940</u>		
					***	00
Add the	dollar value of you	r entries in Column	A on this page. Write that nun	nber here:	\$63,543.	00
	the last page of yo	our form, add the dol	lar value totals from all pages		\$63,543.	00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Fill in this	information to identify your case	:				
Debtor 1	Kevin R. Busch					
20010	First Name	Middle Name Last N	ame			
Debtor 2						
(Spouse if, filing	g) First Name	Middle Name Last N	ame			
United State	es Bankruptcy Court for the: NC	RTHERN DISTRICT OF OHIO				
Case numb	er					
(if known)					☐ Check	if this is an
					ameno	ded filing
Ott: -: - 1 L	Towns 4005/5					
	Form 106E/F					40/45
	le E/F: Creditors Who ete and accurate as possible. Use Par					12/15
Schedule G: Schedule D: left. Attach th name and cas	y contracts or unexpired leases that of Executory Contracts and Unexpired L Creditors Who Have Claims Secured I be Continuation Page to this page. If y se number (if known).	eases (Official Form 106G). Do not in by Property. If more space is needed, rou have no information to report in a	clude any cr copy the Pa	reditors with partially s art you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
	List All of Your PRIORITY Unsecu					
•	creditors have priority unsecured clai So to Part 2.	ms against you?				
_	50 to Part 2.					
Yes.	of your priority unsecured claims. If a			Park Programme		
identify w possible, Part 1. If	what type of claim it is. If a claim has bott, list the claims in alphabetical order acc more than one creditor holds a particular explanation of each type of claim, see th	h priority and nonpriority amounts, list th ording to the creditor's name. If you hav ar claim, list the other creditors in Part 3.	at claim here e more than t	and show both priority	and nonpriority amoun	its. As much as
2.1 RIT	ΓΛ	Last 4 digits of account numb	or 4040	\$550.00	amount \$550.00	amount \$0.00
	rity Creditor's Name	Last 4 digits of account numb	4940	<u>\$550.00</u>		<u> </u>
	Box 477900	When was the debt incurred?	2017		_	
	padview Heights, OH 44147	As of the data you file the alg	im in Chaal	all that apply		
	nber Street City State Zlp Code	As of the date you file, the cla	im is: Check	all that apply		
_		☐ Contingent				
_	otor 1 only	☐ Unliquidated				
☐ Deb	otor 2 only	☐ Disputed				
☐ Deb	otor 1 and Debtor 2 only	Type of PRIORITY unsecured				
☐ At le	east one of the debtors and another	☐ Domestic support obligation	3			
☐ Che	eck if this claim is for a community d	ebt Taxes and certain other deb	ts you owe th	ne government		
Is the o	claim subject to offset?	Claims for death or persona	injury while y	you were intoxicated		
■ No		☐ Other. Specify				
☐ Yes		Income	Гах			
Part 2:	ist All of Your NONPRIORITY Un	secured Claims				
	creditors have nonpriority unsecured					
	ou have nothing to report in this part. So	- ,	er schedules			
Yes.	3pania 6					
unsecure	of your nonpriority unsecured claims ed claim, list the creditor separately for e creditor holds a particular claim, list the	ach claim. For each claim listed, identify	what type of	claim it is. Do not list cl	aims already included	in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Ace Cash Express	Last 4 digits of account number 4940	\$596.79
Nonpriority Creditor's Name	Last 4 digits of account number 4340	<u></u>
1231 Greenway Drive, Suite 600 rving, TX 75038	When was the debt incurred? 2014	_
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	ot
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Payday Loan	
AT&T Uverse	Last 4 digits of account number 0030	\$163.00
Nonpriority Creditor's Name		·
P.O. Box 9100 Farmingdale, NY 11735	When was the debt incurred? 2018	
Jumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did n	ot
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Cable-Internet/Collection	
Capital One	Last 4 digits of account number 9148	\$470.00
Nonpriority Creditor's Name P.O. Box 30285	When was the debt incurred? 2018	
Salt Lake City, UT 84130-0285	When was the dest mounted:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did report as priority claims	ot
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 10

City of Cleveland Division of Water Nonpriority Creditor's Name	Last 4 digits of account number 2601	\$382.5			
P.O. Box 94540 Cleveland, OH 44101-4540	When was the debt incurred? 2019				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	not			
No	\square Debts to pension or profit-sharing plans, and other similar debts				
□ Yes	Other. Specify Utility				
Cleveland Code Violations	Last 4 digits of account number 1121	\$100.0			
Nonpriority Creditor's Name					
PO Box 99910 Cleveland, OH 44199-0910	When was the debt incurred? 08/30/18				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
— No □ Yes					
□ res	■ Other. Specify Fine				
Cleveland Public Power Nonpriority Creditor's Name	Last 4 digits of account number 8711	\$573.8			
P.O. Box 94560 Cleveland, OH 44101	When was the debt incurred? 2019				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not			
No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Utility				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 10

Credit One Bank	Last 4 digits of account number	1344	\$1,390.0
Nonpriority Creditor's Name	Last 4 digits of account number		\$1,390.00
P.O. Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred?	2012	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	1	
Dominion Energy Ohio Nonpriority Creditor's Name	Last 4 digits of account number	0897	\$853.75
P.O. Box 26785 Richmond, VA 23261-6785	When was the debt incurred?	2019	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Utility		
Huntington Bank	Last 4 digits of account number	3431	\$500.00
Nonpriority Creditor's Name P.O. Box 182519	When was the debt incurred?	2019	
Columbus, OH 43218-2519 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Overdrafted	d	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 10

Metro Health	Last 4 digits of account number	4940	Unknowr	
Nonpriority Creditor's Name PO Box 931703 Cleveland, OH 44193	When was the debt incurred?	2019		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify Medical			
NCP Finance Ohio LLC	Last 4 digits of account number	6707	\$3,142.00	
Nonpriority Creditor's Name 205 Sugar Camp Circle Dept CNG	When was the debt incurred?	2018		
Dayton, OH 45409 Number Street City State Zlp Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	-	,		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing			
Yes	Other. Specify Payday Loa	an/Collection		
NEORSD	Last 4 digits of account number	4308	\$1,033.19	
Nonpriority Creditor's Name			V 1,000110	
P.O. Box 94550	When was the debt incurred?	2019		
Cleveland, OH 44101-4550 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	7.6 or and date you me, are claim.	o. Chook an anat appry		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
■ No	Debts to pension or profit-sharing	-sharing plans, and other similar debts		
□ Yes	Other. Specify Utility			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 10

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Debto	r 1 Kevin R. Busch	Case numbe	r (if known)			
4.1	Ohio Teamsters Credit Union	Last 4 digits of account number 4324		\$2,000.00		
	Nonpriority Creditor's Name 6100 Rockside Woods Dr. Independence, OH 44131	When was the debt incurred? 2017				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	at apply			
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a separation agreem report as priority claims ☐ Debts to pension or profit-sharing plans, and o				
	■ No	■ Other. Specify Loan	urer similar debts			
4.1 4	Pathology Laboratories	Last 4 digits of account number 9339		\$249.00		
	Nonpriority Creditor's Name 1946 N. 13th St. Suite 301 Toledo, OH 43604	When was the debt incurred? 2012				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	at apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreem report as priority claims ☐ Debts to pension or profit-sharing plans, and o	·			
	☐ Yes	Other. Specify Medical/Collection				
4.1	Progressive Direct Insurance Co Nonpriority Creditor's Name P.O. Box 512929	Last 4 digits of account number 1960 When was the debt incurred? 2017		\$86.00		
	Los Angeles, CA 90051 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	at apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?					
	■ No	☐ Debts to pension or profit-sharing plans, and o ☐ Other. Specify Insurance/Collection	ther similar debts			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 10

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

RBS Citizens N.A. Nonpriority Creditor's Name	Last 4 digits of account number	0584	\$371.6
1000 La Fayette Gill Bridgeport, CT 06604	When was the debt incurred?	2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	• • • • • • • • • • • • • • • • • • • •	
Yes	Other. Specify Credit Card	d/Collection	
RISE Co.	Last 4 digits of account number	6865	\$3,143.0
Nonpriority Creditor's Name 4150 International	When was the debt incurred?	2018	·
Fort Worth, TX 76109 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
ls the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Payday Loa	an/Collection	
Spectrum/Time Warner		0590	\$335.04
Nonpriority Creditor's Name	Last 4 digits of account number		\$335.U
PO Box 2553	When was the debt incurred?	2018	
Columbus, OH 43216 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.5 or the date you me, the claim.	or chook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharin		
□ Yes	■ Other Specify Cable/Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 10

Debtor	1 Kevin R. Busch		Case number (if known)	
4.1 9	T-Mobile	Last 4 digits of account number	18xx	\$197.00
	Nonpriority Creditor's Name Bankruptcy Department PO Box 53410	When was the debt incurred?	2018	
	Bellevue, WA 98015-3410			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	□ Yes	Other. Specify Phone/Co		
4.2 0	T-Mobile	Last 4 digits of account number	0114	\$1,025.46
	Nonpriority Creditor's Name	When was the debt incurred?	2018	
	Bankruptcy Department PO Box 53410	when was the dept incurred?	2010	
	Bellevue, WA 98015-3410 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, ,	195 Onook all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	_ `		
		☐ Disputed Type of NONPRIORITY unsecure	ed claim:	
	At least one of the debtors and another	Student loans	eu ciaiii.	
	☐ Check if this claim is for a community debt	_	paration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	Yes	Other. Specify Phone		
is tryii have r notifie Name ar Caine	is page only if you have others to be notified ng to collect from you for a debt you owe to s	about your bankruptcy, for a debt that comeone else, list the original creditor at you listed in Parts 1 or 2, list the add or submit this page. On which entry in Part 1 or Part 2 did you Line 4.15 of (Check one):	Part 1: Creditors with Priority Unsecured Claim	here. Similarly, if you itional persons to be
	, TX 75234		Part 2: Creditors with Nonpriority Unsecured C	laims
Danas	, 17, 1929 1	Last 4 digits of account number	6990	
	nd Address	On which entry in Part 1 or Part 2 did yo		
	ns Bank ens Dr.		Part 1: Creditors with Priority Unsecured Claim	
	ide, RI 02915		Part 2: Creditors with Nonpriority Unsecured C	laims
1111010	, KI 02010	Last 4 digits of account number	0584	
Conve 800 S\ PO Bo	nd Address ergent Outsourcing N 39th Street ex 9004		u list the original creditor? Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured C	
Kento	n, WA 98057	Last 4 digits of account number	2394	
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Official Fo	orm 106 F/F Sche	edule E/F: Creditors Who Have Unsecu	red Claims	Page 8 of 1

Best Case Bankruptcy

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Debtor 1 Kevin R. Busch	Case number (if known)			
Credence Resource Management LLC P.O. Box 2238	Line 4.2 of (Check one): ☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with None			
Southgate, MI 48195-4238	Last 4 digits of account number 3395			
Name and Address Credit Management 4200 International Parkway	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None	-		
Carrollton, TX 75007	Last 4 digits of account number 9004	onemy endedured elamine		
Name and Address Diversified Consultants P.O. Box 551268	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.19 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None			
Jacksonville, FL 32255	Last 4 digits of account number 6726			
Name and Address ERC P.O. Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number 0030	-		
Name and Address Finance Systems of Toledo Inc. 2821 N.Holland-Sylvania Rd. P.O. Box 351297 Toledo, OH 43635-1297	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None	-		
	Last 4 digits of account number 9339			
Name and Address LVNV Funding LLC 55 Beattie Place #110 Greenville, SC 29601	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number			
Name and Address MRS BPO, LLC 1930 Olney Ave. Cherry Hill, NJ 08003	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number 9004			
Name and Address NCB Management Services 1 Allied Drive Feasterville Trevose, PA 19053	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.17 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number 6707	•		
Name and Address NCB Management Services 1 Allied Drive Feasterville Trevose, PA 19053	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number 6707	-		
Name and Address T-Mobile P.O. Box 742596 Cincinnati, OH 45274	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.19 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number	-		
Name and Address T-Mobile P.O. Box 742596 Cincinnati, OH 45274	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Prior Part 2: Creditors with None Last 4 digits of account number	-		
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 10

Official Form 106 E/F

Debtor 1 Kevin R. Busch		Case number (if known)
Time Warner Cable	Line <u>4.18</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims

c/o Credit Management PO Box 118288 Carrollton, TX 75011-8288

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9004

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	550.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	550.00
				7	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	16,612.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	16,612.22

Fill in this information to identify your case:							
Debtor 1	Kevin R. Busch						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO				
Case number				☐ Check if this is an			
(ii kilowii)				amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

1 111 111 (11	us intormation to identity volls.	caso.			
Debtor 1	is information to identify your	case.			
Deplor 1	Kevin R. Busch First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case nur	mher				
(if known)	mbei				Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
fill it out, your nam		boxes on the left. Attach). Answer every question	the Additional Page t	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
■ No	lo.				
□ Ye	•				
	/ithin the last 8 years, have you ona, California, Idaho, Louisiana,				states and territories include
	lo. Go to line 3. es. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
3. In Co	ne 2 again as a codebtor only i	if that person is a guaran	spouse as a codebtor	if your spouse is filing sure you have listed the	with you. List the person shown
Forn	Column 2.	,, ,, ,, ,,		96G). Use Schedule D, S	
Forn		, in the second second			schedule E/F, or Schedule G to fill ditor to whom you owe the debt
Forn out (Column 1: Your codebtor	, in the second second		Column 2: The cree Check all schedules	Schedule E/F, or Schedule G to fill ditor to whom you owe the debt at that apply:
Forn	Column 1: Your codebtor	, in the second second		Column 2: The cree Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the debt that apply:
Forn out (Column 1: Your codebtor Name, Number, Street, City, State and Z	, in the second second		Column 2: The cree Check all schedules Schedule D, line	ditor to whom you owe the debt that apply:
Forn out (Column 1: Your codebtor Name, Number, Street, City, State and Z	, in the second second		Column 2: The cree Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the debt that apply:
3.1	Column 1: Your codebtor Name, Number, Street, City, State and Z Name Number Street	IP Code	ule G (Official Form 10	Column 2: The cree Check all schedules Schedule D, line Schedule E/F, line Schedule G, line	ditor to whom you owe the debt that apply:
Forn out (Column 1: Your codebtor Name, Number, Street, City, State and Z Name Number Street	IP Code	ule G (Official Form 10	Column 2: The cree Check all schedules ☐ Schedule D, line ☐ Schedule E/F, line	ditor to whom you owe the debt to that apply: and apply: apply:

F-144						1				
	in this information to identify your control									
Del	otor 1 Kevin R. Bu	sch			_					
1 -	otor 2				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO		_					
1	se number 		-			□ A		ed filing ent show	ving postpetiti e following da	
0	fficial Form 106I						IM / DD/ `			
	chedule I: Your Inc	ome				IVI	אטט / ואוו	1111		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not include	inforn	natio	on about	your sp	ouse. If 1	more space i	is needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non	n-filing spous	ie
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed	■ Employed			☐ Employed			
		Employment status	☐ Not employed			☐ Not employed				
	employers.	Occupation	1099 employee							
	Include part-time, seasonal, or self-employed work.	Employer's name	Superior Stone							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? > 3 week	s			_			
Pai	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for a	any l	ine, write	\$0 in the	space.	Include your r	non-filing
•	u or your non-filing spouse have mo		ombine the information f	or all e	mplo	oyers for	that perso	on on the	e lines below.	If you need
						For Deb	otor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/	<u>A</u>
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$_	N/	<u>A</u>
1	Calculate gross Income Add lin	2 1 lino 2		1	•		0.00	•	NI/A	

				For	Debtor 1		r Debtor 2 or n-filing spouse	
	Copy	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$_	N/A	
	5g.	Union dues	5g.	\$	0.00	\$_	N/A	
_	5h.	Other deductions. Specify:	_ 5h.+	· —	0.00	_	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$_	N/A	
7.	Calc	rulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$_	N/A	
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a. 8b.	\$ \$	1,275.00 0.00	\$_ \$	N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
	0.1	settlement, and property settlement.	8c.	\$	0.00	\$_	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$_	N/A	
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e.	\$	0.00	\$_	N/A	
	8g.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$	0.00	\$_ \$	N/A N/A	
	8h.	Other monthly income. Specify: Auto Mechanic- Side Job	8h.+	\$_	200.00	+ \$ -	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,475.00	\$_	N/A	
10.		·	10. \$	•	1,475.00 + \$		N/A = \$	1,475.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ Combine	
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monthly	income
		Yes. Explain: Debtor is a 1099 employee with Superior Stone. I fluctuate. He has worked at this job less than 3 w a total of \$1500 between the jobs he has complet much he will have to pay in taxes. Debtor also does some auto mechanic work on total control of the storage of	eeks. ed. Tl	To d	ate he has we penses listed	orked are a	I 3 jobs and has an estimate of h	made

E:III	in this information to identify your case:				
	in this information to identify your case.				
Deb	Kevin R. Busch			ck if this is:	
Deh	btor 2			An amended filing	ving postpetition chapter
	pouse, if filing)		Ц	13 expenses as of	
			-	·	
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			MM / DD / YYYY	
Cas	se number				
(If kı	known)				
Oi	fficial Form 106J				
So	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fmber (if known). Answer every question.				
	rt 1: Describe Your Household				
1.	Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No
					Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
J.	expenses of people other than				
	yourself and your dependents?				
Par	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a supply plicable date.				
the	clude expenses paid for with non-cash government assistance if a value of such assistance and have included it on Schedule I: Y			Vous even	
(Off	fficial Form 106I.)			Your expe	#II5#5
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	S	720.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	6	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	· -	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	S	0.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	5. \$	5	0.00

Kevin R.	Busch	Case num	ber (if known)	
ities:				
Electricity,	heat, natural gas	6a.	\$	300.00
Water, sev	wer, garbage collection	6b.	\$	175.00
		6c.	\$	70.00
•			·	100.00
•			·	350.00
			·	0.00
				50.00
	· · · · · · · · · · · · · · · · · · ·		· -	
_			·	50.00
	•	11.	\$	0.00
		12	\$	160.00
	• •		·	
				0.00
	ributions and religious donations	14.	\$	0.00
	, , ,	45-	Ф	2.22
			·	0.00
			· —	0.00
. Vehicle in:	surance	15c.	\$	85.00
			\$	0.00
	clude taxes deducted from your pay or included in lines 4 or		\$	0.00
·	asea navments:		Ψ	0.00
		17a	\$	0.00
			·	0.00
			· —	
				0.00
			\$	0.00
			¢	0.00
		1 1061).		
	s you make to support others who do not live with you.	4.0	Ф	0.00
· —				
				2.22
			·	0.00
				0.00
		20c.	\$	0.00
 Maintenar 	nce, repair, and upkeep expenses	20d.	\$	0.00
. Homeown	er's association or condominium dues	20e.	\$	0.00
er: Specify:	Pet Supplies	21.	+\$	30.00
	. с. сиррисс			25.00
				23.00
culate your	monthly expenses			
. Add lines 4	through 21.		\$	2,115.00
. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
			s	2,115.00
22	a and 222. The result to your monthly expended.			2,113.00
	monthly net income.			
culate your			•	1,475.00
	12 (your combined monthly income) from Schedule I.	23a.	\$	1,473.00
. Copy line		23a. 23b.		
. Copy line	12 (your combined monthly income) from Schedule I.			2,115.00
Copy lineCopy yourSubtract y	12 (your combined monthly income) from Schedule I. monthly expenses from line 22c above. our monthly expenses from your monthly income.	23b.	-\$	2,115.00
Copy lineCopy yourSubtract y	12 (your combined monthly income) from Schedule I. monthly expenses from line 22c above.			
Copy line Copy your Subtract y The result you expect a example, do you ification to the	12 (your combined monthly income) from Schedule I. monthly expenses from line 22c above. our monthly expenses from your monthly income.	23b. 23c. after you file this	-\$\$	-640.00
Copy line Copy your Subtract y The result you expect a example, do you	12 (your combined monthly income) from Schedule I. monthly expenses from line 22c above. our monthly expenses from your monthly income. is your monthly net income. an increase or decrease in your expenses within the year or do you expect to finish paying for your car loan within the year or do you expenses.	23b. 23c. after you file this	-\$\$	-640.00
old statement of the contract	ities: Electricity, Water, ser Telephone Other. Spe d and house Idcare and ce Insportation. Into include ce Installe cont Interest of include in Interest of in	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cellphone de and housekeeping supplies Idcare and children's education costs thing, laundry, and dry cleaning sonal care products and services Idical and dental expenses insportation. Include gas, maintenance, bus or train fare. Internation include car payments. International include gas, maintenance, bus or train fare. International include gas, maintenance, bus or train fare. International include insurance, not include insurance, and support included in lines 4 or 20. If insurance Health insurance Health insurance Health insurance Other insurance. Specify: In payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: In payments of alimony, maintenance, and support that you did not rejucted from your pay on included in the rejucted from your pay on included in the rejucted from your pay on line 5, Schedule I, Your Income (Official Fornar payments you make to support others who do not live with you. In payments of alimony, maintenance, and support that you did not rejucted from your pay on line 5, Schedule I, Your Income (Official Fornar payments you make to support others who do not live with you. In payments on the property expenses not included in lines 4 or 5 of this form or on the property expenses on the property. Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues International colleges of the supplies International colleges of the supplies International colleges of the supplies International care deducted in lines 4 or 5 of this form or on the supplies International care and the supplies International care and care and cable services International	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cellphone d and housekeeping supplies 7. Idcare and children's education costs thing, laundry, and dry cleaning sonal care products and services 10. Idical and dental expenses 11. Insportation. Include gas, maintenance, bus or train fare. Into tinclude car payments. Include car payments. Include car payments. Intiable contributions and religious donations urance. Intiable contributions and religious donati	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: Cellphone 6d. \$ dand housekeeping supplies ddare and children's education costs thing, laundry, and dry cleaning sonal care products and services 10. \$ slical and dental expenses 11. \$ snsportation. Include gas, maintenance, bus or train fare. not include car payments. ritiable contributions and religious donations rance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance 15a. \$ Life insurance 15b. \$ Vehicle insurance 15c. \$ Other insurance. Specify: 8e. Do not include taxes deducted from your pay or included in lines 4 or 20. City: allment or lease payments: Car payments for Vehicle 1 17a. \$ Car payments for Vehicle 2 17b. \$ Other. Specify: Other. Specify: 17c. \$ Tother. Specify: 17d. \$ Tother.

Fill in this infor	rmation to identify your	case:			
Debtor 1	Kevin R. Busch				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)				☐ Check if thi	s is an
,				amended fi	
ou must file the obtaining mone ears, or both. 1	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	n connection with a bank	or amended schedules.	ect information. Making a false statement, concealing pront in the sup to \$250,000, or imprisonment for	
	n Below	one who is NOT an attor	ney to help you fill out b	ankruntey forms?	
Dia you po	ay or agree to pay some		ney to help you mi out b	annaptoy formo.	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Prepar Declaration, and Signature (Officia	
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	d with this declaration and	
X /s/ Ke	vin R. Busch		X		
	R. Busch		Signature of I	Debtor 2	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date ____

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Signature of Debtor 1

Date March 11, 2019

Fill in this in	nformation to identify you	r case:			
Debtor 1	Kevin R. Busch				
Debior	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT C	DF OHIO		
Case numbe (if known)	er			-	Check if this is an mended filing
Stateme Be as comple information.	ete and accurate as poss If more space is needed,	, attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup	
	nown). Answer every que ive Details About Your Ma	stion. arital Status and Where You	Lived Before		
1. What is	your current marital statu	us?			
_	rried t married				
2. During t	the last 3 years, have you	lived anywhere other than	where you live now?		
■ No	s. List all of the places you	lived in the last 3 years. Do no	ot include where you live nov	<i>i</i> .	
Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
				ity property state or territory ico, Texas, Washington and W	
■ No	s. Make sure you fill out Sca	hedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2	xplain the Sources of You	ır Income			
Fill in the	e total amount of income yo	mployment or from operating the control of the cont	all businesses, including part		ndar years?
□ No					
Yes	s. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ry 1 of current year until u filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Parsippany, NJ 07054

☐ Credit Card

payment due

☐ Loan Repayment
☐ Suppliers or vendors
☐ Other Regular monthly

Case number (if known)

Official Form 107

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Debtor 1

Kevin R. Busch

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Best Case Bankruptcy

Deb	otor 1 Kevin	R. Busch		Case number	(if known)	
14.	■ No	-		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	☐ Yes. Fill i	n the details for each gift or	contribut	ion.		
	more than \$6 Charity's Na			Describe what you contributed	Dates you contributed	Value
Par	t 6: List Cei	rtain Losses				
15.	Within 1 year or gambling?		uptcy or	since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,
	■ No □ Yes. Fill	in the details.				
		property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property
	how the loss	coccurred		e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Cei	rtain Payments or Transfe	rs			
	□ No ■ Yes. Fill i Person Who Address Email or web Person Who Rauser & A	n the details. Was Paid osite address Made the Payment, if Not		Description and value of any property transferred Attorney Fees	Date payment or transfer was made	Amount of payment \$985.00
	614 W. Sup Cleveland,				12/14/18	
	Greenpath 36500 Corp Farmington			Credit Counseling + Financial Mgmt	02/18/19	\$39.20
	promised to h		editors o	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who
	Person Who Address	Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Lexington I 360 N Culte North Salt I			Debt relief program	2018	\$500.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Name of Storage Facility

Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Kevin R. Busch Case number (if known)

Par	t 9: Identify Property You Hold or Control for S	omeone Else			
23.	Do you hold or control any property that someon for someone.	e else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value
Par	t 10: Give Details About Environmental Informat	ion			
For	the purpose of Part 10, the following definitions a	pply:			
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	_	•	
	Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si	nental law defines as a hazardous	s was	ste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that you	ı know about, regardless of wher	n the	ey occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	und	ler or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any r	elease of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ironr	mental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	t 11: Give Details About Your Business or Conn	ections to Any Business			
27.	Within 4 years before you filed for bankruptcy, di	d you own a business or have an	ny of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a tra	ade, profession, or other activity,	, eith	er full-time or part-time	
	☐ A member of a limited liability company (LLC) or limited liability partnersh	ip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing executiv	ve of a corporation			
	☐ An owner of at least 5% of the voting or e	equity securities of a corporation			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Kevin R. Busch	Ca	ase number (if known)
	■ No. None of the above applies. Go to	Part 12	
	_	I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to a	Dates business existed anyone about your business? Include all financial
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are twith	rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
Ke	Kevin R. Busch vin R. Busch nature of Debtor 1	Signature of Debtor 2	
Dat	e _March 11, 2019	Date	
Did ■ N	·	ent of Financial Affairs for Individuals Filir	ng for Bankruptcy (Official Form 107)?
■ N	you pay or agree to pay someone who is no lo es. Name of Person Attach the <i>Bankru</i>		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				•
Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Kevin R. Busch			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo Stateme r		n for Indiv	viduals Filing Under Chapt	er 7 12/15
you have lease You must file thi whiche on the If two married pe sign ar Be as complete a write you	ever is earlier, unless the form cople are filing together ind date the form. and accurate as possible our name and case numle	r property, or d the lease has n hin 30 days after court extends th n a joint case, bo e. If more space is per (if known).		ne creditors and lessors you list
1. For any credit	-		: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property that	at is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's H name:	Iome Point Financial (Corp.	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No ■ Yes
Description of property securing debt:	5409 Vandalia Ave. OH 44144 Cuyahog Debtor's Residence Purchased in 2014 t PPN: 012-18-014	a County [′]	 Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: The debtor will retain the collateral and continue to make monthly payments 	— 163
Creditor's N	lational Cash Advance)	Surrender the property.	■ No
Description of property	2002 Cadillac Escal miles	ade 200,000	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes

Part 2: List Your Unexpired Personal Property Leases

securing debt: Location: 5409 Vandalia Ave., Cleveland OH 44144

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Debt	or 1 Kevin R. Busch	Case number (if known)
Desc	cribe your unexpired personal property leases	Will the lease be assumed?
	or's name:	□ No
Prop	pription of leased erty:	☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
	or's name: pription of leased	□ No
Prop		☐ Yes
Part :	3: Sign Below	
Unde prope	r penalty of perjury, I declare that I have indicated erty that is subject to an unexpired lease.	I my intention about any property of my estate that secures a debt and any personal
<i>-</i> `` _	/s/ Kevin R. Busch	X
	Kevin R. Busch Signature of Debtor 1	Signature of Debtor 2
	Date March 11. 2019	Date

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill i	n this information to identify your case:		Chec	k one box onlv as di	rected in this form and	in Form
Deb	tor 1 Kevin R. Busch			-1Supp:		
1	tor 2			1. There is no presu	umption of abuse	
' '	ed States Bankruptcy Court for the: Northern Distric	t of Ohio			o determine if a presun nade under <i>Chapter 7 I</i>	'
Cas	e number				cial Form 122A-2).	vicaris rest
(if kno					does not apply now be service but it could ap	
				Check if this is a	n amended filing	
Off	<u>icial Form 122A - 1</u>					
Ch	apter 7 Statement of Your Cu	urrent Monthly	Inco	me		12/15
attacl case	complete and accurate as possible. If two married peop in a separate sheet to this form. Include the line number to number (if known). If you believe that you are exempted by ying military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	o which the additional inform from a presumption of abuse	ation app because	olies. On the top of ar you do not have prin	y additional pages, writ narily consumer debts o	e your name and r because of
	What is your marital and filing status? Check one	only.				
	■ Not married. Fill out Column A, lines 2-11.	,				
	☐ Married and your spouse is filing with you. Fill	out both Columns A and B	, lines 2-	11.		
	\square Married and your spouse is NOT filing with yo	u. You and your spouse a	re:			
	\square Living in the same household and are not le	egally separated. Fill out be	oth Colu	mns A and B, lines 2	Y-11.	
	☐ Living separately or are legally separated. F penalty of perjury that you and your spouse ar living apart for reasons that do not include eva	e legally separated under n	onbankr	uptcy law that applie	es or that you and your	
10 th	Il in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to couses own the same rental property, put the income from the	6-month period would be Marchotal by 6. Fill in the result. Do no	1 through t include	h August 31. If the amo any income amount mo	unt of your monthly incompre than once. For examp	e varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commissions (befo	re all \$	0.00	\$	
3.	Alimony and maintenance payments. Do not inclu Column B is filled in.	de payments from a spous	e if \$	0.00	\$	
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.					
5.	Net income from operating a business, profession					
	Gross receipts (before all deductions)	Debtor 1 888.46				
	Gross receipts (before all deductions) Ordinary and necessary operating expenses					
	Net monthly income from a business, profession, or farm	С	opy ere -> \$	888.46	\$	
6.	Net income from rental and other real property	_				
		Debtor 1 \$ 0.00				
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>				
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	0.00	ere -> \$	0.00	\$	
7	Interest dividends and royalties	,	\$	0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

7. Interest, dividends, and royalties

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	it under	·		·	
		0.0	00				
	For you \$ For your spouse \$	-					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.		s a	\$	0.00	\$	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hun domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paymen nanity, or international separate page and pu	ts or	\$	0.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the tot		\$	888.46	+ \$		= \$888.46
							Total current monthly income
Part	2: Determine Whether the Means Test Applies to	You					
12.	Calculate your current monthly income for the year.	Follow these steps:					
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 h	ere=>	\$888.46
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b.	\$10,661.52
13.	Calculate the median family income that applies to y	ou. Follow these step	s:				
	Fill in the state in which you live.	ОН					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the banks	online using the link sp		in the separa		13. tions	\$48,441.00
11	How do the lines compare?	uptcy cicik's office.					
14.	<u> </u>	the ten of page 1, ab	ook boy	1 Thoroic n	o progum	ntion of obvious	
	 Line 12b is less than or equal to line 13. Or Go to Part 3. Line 12b is more than line 13. On the top o 						
	Go to Part 3 and fill out Form 122A-2.	r page 1, check box 2,	THE PIC	sampuon or	<i>abase 15</i> (acterniinea by	TOMI IZZAZ.
Part							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	itement and i	n any atta	ichments is tru	ie and correct.
	X /s/ Kevin R. Busch						
	Kevin R. Busch Signature of Debtor 1						
	Date March 11, 2019						
	MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file Form	122A-2.					
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.					

Official Form 122A-1

Current Monthly Income Details for the Debtor

Debtor Income Details:

Debtor 1

Income for the Period 09/01/2018 to 02/28/2019.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Absolute Services

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	09/2018	\$1,034.93	\$0.00	\$1,034.93
5 Months Ago:	10/2018	\$1,600.00	\$0.00	\$1,600.00
4 Months Ago:	11/2018	\$495.82	\$0.00	\$495.82
3 Months Ago:	12/2018	\$1,500.00	\$0.00	\$1,500.00
2 Months Ago:	01/2019	\$0.00	\$0.00	\$0.00
Last Month:	02/2019	\$0.00	\$0.00	\$0.00
_	Average per month:	\$771.79	\$0.00	
			Average Monthly NET Income:	\$771.79

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Superior Stone** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	09/2018	\$0.00	\$0.00	\$0.00
5 Months Ago:	10/2018	\$0.00	\$0.00	\$0.00
4 Months Ago:	11/2018	\$0.00	\$0.00	\$0.00
3 Months Ago:	12/2018	\$0.00	\$0.00	\$0.00
2 Months Ago:	01/2019	\$0.00	\$0.00	\$0.00
Last Month:	02/2019	\$700.00	\$0.00	\$700.00
	Average per month:	\$116.67	\$0.00	
			Average Monthly NET Income:	\$116.67

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In	re Kevin R. Busch		Case No) .				
		Debtor(s)	Chapter					
	DISCLOSURE OF COMPEN	NSATION OF ATTO	ORNEY FOR I	DEBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	985.00				
	Prior to the filing of this statement I have received			985.00				
	Balance Due			0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other perso	n unless they are me	embers and associate	es of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.							
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 							
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.							
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	or payment to me fo	r representation of the	he debtor(s) in			
_	March 11, 2019	/s/ Anna Marie \						
	Date	Anna Marie Wal Signature of Attorn						
		Rauser & Associates						
		614 W. Superior						
		Cleveland, OH 4	Cleveland, OH 44113 216-263-6200 Fax: 216-263-6202					
		www.ohiolegalclinic.com						
		Name of law firm						

United States Bankruptcy Court Northern District of Ohio

In re	Kevin R. Busch		Case No.	se No.	
		Debtor(s)	Chapter	7	
	VE	RIFICATION OF CREDITOR	MATRIX		
The ab	ove-named Debtor hereby verific	es that the attached list of creditors is true and c	correct to the best	of his/her knowledge.	
Date:	March 11, 2019	/s/ Kevin R. Busch			
		Kevin R. Busch Signature of Debtor			

Ace Cash Express 1231 Greenway Drive, Suite 600 Irving, TX 75038

AT&T Uverse P.O. Box 9100 Farmingdale, NY 11735

Caine & Weiner 12005 Ford Rd. Dallas, TX 75234

Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285

Citizens Bank 1 Citizens Dr. Riverside, RI 02915

City of Cleveland Division of Water P.O. Box 94540 Cleveland, OH 44101-4540

Cleveland Code Violations PO Box 99910 Cleveland, OH 44199-0910

Cleveland Public Power P.O. Box 94560 Cleveland, OH 44101

Convergent Outsourcing 800 SW 39th Street PO Box 9004 Renton, WA 98057

Credence Resource Management LLC P.O. Box 2238 Southgate, MI 48195-4238

Credit Management 4200 International Parkway Carrollton, TX 75007

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193-8872

Diversified Consultants P.O. Box 551268 Jacksonville, FL 32255 Dominion Energy Ohio P.O. Box 26785 Richmond, VA 23261-6785

ERC P.O. Box 57547 Jacksonville, FL 32241

Finance Systems of Toledo Inc. 2821 N.Holland-Sylvania Rd. P.O. Box 351297 Toledo, OH 43635-1297

Home Point Financial Corp. NMLS #7706 Entin Road Suite 200 Parsippany, NJ 07054

Huntington Bank P.O. Box 182519 Columbus, OH 43218-2519

LVNV Funding LLC 55 Beattie Place #110 Greenville, SC 29601

Metro Health PO Box 931703 Cleveland, OH 44193

MRS BPO, LLC 1930 Olney Ave. Cherry Hill, NJ 08003

National Cash Advance 5194 Pearl Rd. Cleveland, OH 44129

NCB Management Services 1 Allied Drive Feasterville Trevose, PA 19053

NCB Management Services 1 Allied Drive Feasterville Trevose, PA 19053

NCP Finance Ohio LLC 205 Sugar Camp Circle Dept CNG Dayton, OH 45409

NEORSD P.O. Box 94550 Cleveland, OH 44101-4550 Ohio Teamsters Credit Union 6100 Rockside Woods Dr. Independence, OH 44131

Pathology Laboratories 1946 N. 13th St. Suite 301 Toledo, OH 43604

Progressive Direct Insurance Co P.O. Box 512929 Los Angeles, CA 90051

RBS Citizens N.A. 1000 La Fayette Gill Bridgeport, CT 06604

RISE Co. 4150 International Fort Worth, TX 76109

RITA PO Box 477900 Broadview Heights, OH 44147

Spectrum/Time Warner PO Box 2553 Columbus, OH 43216

T-Mobile
Bankruptcy Department
PO Box 53410
Bellevue, WA 98015-3410

T-Mobile
Bankruptcy Department
PO Box 53410
Bellevue, WA 98015-3410

T-Mobile P.O. Box 742596 Cincinnati, OH 45274

T-Mobile P.O. Box 742596 Cincinnati, OH 45274

Time Warner Cable c/o Credit Management PO Box 118288 Carrollton, TX 75011-8288